

# **SUPPORTS & SERVICES RESOURCE HANDBOOK**

**Toronto  
2002 Edition**

**CONCERNED PARENTS OF  
TORONTO INC.**



**A RESOURCE HANDBOOK**  
**FOR SUPPORTS AND SERVICES FOR PERSONS**  
**WITH A DUAL DIAGNOSIS IN TORONTO**

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Community Information Toronto The Blue Book, 2001. Directory of Community Services in Toronto

Community Resources Consultants of Toronto, Making Choices, A Consumer / Survivor's Guide to Adult Mental Health Services and Supports in Toronto, 1999-2000

MATCH Project. Creating a Continuum of Supports and Services, A Resource Document, 1996.

Lynn Eakin and Associates, Toronto. The Twelve Commandments for Successful Lobbying

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## ABOUT CONCERNED PARENTS

We are a not for profit corporation consisting of parents, relatives and friends of individuals who have an intellectual disability and mental health needs (dual diagnosis). Our mission is to ensure that these individuals get the supports necessary to live productive lives in the community.

There are many gaps and barriers in the service systems for those with a dual diagnosis. This lack of services from both the mental health and developmental sectors, and the lack of integration of services has marginalised this population.

Our organization functions as a support group for families, and provides information to families and professionals to help them support those with a dual diagnosis. We also make our views known to both government and community agencies to ensure they understand what families need to help their sons or daughters.

If you would like to become a member of our organization, please return the bottom portion of this page to:

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## ABOUT THIS HANDBOOK

This is the fourth edition of the resource handbook for persons with an intellectual disability and mental health needs (dual diagnosis) in Toronto. We hope it will be helpful to consumers, family, friends, advocates and service providers. It identifies key organizations in Toronto and effective strategies to help you plan and get the supports and services you need. The focus is primarily adults but does include some services for youth as well.

The handbook is not intended to include all possible organizations but rather organizations that are geared to, or have shown a capacity to serve individuals with a dual diagnosis. These include a range of supports and services in both the developmental and mental health sectors. For a full listing of all community organizations please see the Community Information Toronto [The Blue Book, 2001. Directory of Community Services in Toronto](#); call them at 416-397-4636 or visit their web site at [www.communityinfotoronto.org](http://www.communityinfotoronto.org). It is important to remember that each organization provides services based on certain entrance criteria such as age, individual needs, and whether they have any space in their program. The only way to find out if an organization is a good fit and/or can provide services to you is to contact the intake staff and discuss your particular situation. Since Concerned Parents of Toronto cannot assess your situation and needs, we cannot recommend a specific agency.

This edition of the Handbook is divided into three sections.

- **Section One** is an *introduction*
- **Section Two** *describes the two sectors involved and provides information on how to navigate the sectors* such as:
  - how to get a case manager
  - what to do in a crisis
  - indicators of a dual diagnosis
  - a supports and services guide to help you plan
  - sample questions you might consider asking when calling an agency
  - who to call to learn about government programs and policies
  - other resources you might find helpful.
- **Section Three** has an *index arranged by type of service and lists a number of key supports and services* that you might consider contacting. We have listed the organizations alphabetically. There is also an *important numbers at a glance* page.

To help you find a particular type of service, go to the Index of Supports and Services (Section three, pages 44-54) that groups all the organizations under the different types of services they offer. For example, if you are looking for a case manager look in the index under Case Management Services and you will find a list of mental health and developmental service agencies that provide case management.



Just a few words about the language and terms used in the handbook. We use the term *intellectual disability* to refer to cognitive limitations. (Other terms the reader might be familiar with are developmental handicap, developmental delay or mental retardation). The sector that primarily provides service and support for persons with intellectual disabilities is called the *developmental sector*. The sector that provides service and support for persons with mental health needs is called the *mental health sector*. Individuals who are receiving services in either sector are referred to as the *consumer*.

We hope that you find the Directory useful. We welcome your comments, feedback and suggestions.

To request a hard copy of the handbook, you can contact Susan Morris by calling 416-535-8501, ext. 1131 or by e-mailing her at [susan\\_morris@camh.net](mailto:susan_morris@camh.net).

## DUAL DIAGNOSIS - AN OVERVIEW

The term dual diagnosis refers to an individual who has an *intellectual disability and mental health needs*. They may or may not have been formally diagnosed with an intellectual disability, a mental illness or both. Individuals with a dual diagnosis are a marginalised group in our society often exposed to prejudices, abuse and social isolation. They experience the same range of severe and prolonged mental health difficulties including depression, mood disorders and schizophrenia as the general population, but at much higher rates. It is estimated that there are at least 6,000 individuals with a dual diagnosis living in Metro Toronto (MATCH, 1996). Unfortunately, many individuals are never properly identified and as a result do not receive the comprehensive treatment they need. While there have been recent improvements in how services are being provided, many gaps and barriers remain in the service system resulting in consumers not being able to access the range of services they need.

Many consumers are undiagnosed or receive a diagnosis in one aspect only. For some they were identified with an intellectual disability as children. However, they may never have had their mental health needs thoroughly identified or been reassessed as they age and experience stress at various life stages or events. One reason for this is that mental health issues often show up as behavioral problems. People then treat the behavior problem without identifying or treating the underlying mental health need. Other individuals have been diagnosed with a mental illness and no one has suspected that they also have an intellectual disability. Still others have been overlooked entirely and have never had their intellectual or mental health status evaluated but are in fact dually diagnosed.

*Several factors contribute to not properly identifying persons with a dual diagnosis and the many gaps and barriers to service in both the developmental and mental health sectors. Here are a few of the key issues.*

- It can be quite complicated to understand how a person's intellectual disability and mental health interact together.
- When an individual with an intellectual disability has a mental illness the symptoms are usually less obvious and different from the general population.
- Individuals often present as higher functioning or they deny their cognitive difficulties. They use their strengths and splinter skills to mask their denial of their intellectual disability and/or their sadness. This is referred to as a cloak of competence. The cloak fools people. It sets up a chain reaction around denial of the intellectual disability and high expectations. These individuals may be struggling to cope in the community or living on the streets and many more are thought to be in the justice system.
- There are many service issues that act as barriers such as long waiting lists, requiring a diagnosis in order to get service and getting stuck in one sector when you need

services from both sectors.

The result is that many still are undiagnosed and untreated.

Persons with a dual diagnosis have been a greatly underserved group and yet very vulnerable and at risk. Unfortunately, there are not many professionals (e.g., psychiatrists, nurses and social workers) who are experienced and knowledgeable in assessing, diagnosing and treating individuals with a dual diagnosis. Treatment takes much longer for these consumers than for others. Unfortunately, they often fall through the cracks in our society and don't get the treatment they need. However with the right approach, a person with a dual diagnosis can certainly get help with their mental health needs. It can be confusing for everyone involved finding the right kind of help and support. There are a few key things to remember when helping plan services with a person with a dual diagnosis.

- Everyone involved needs to work together as a team
- Several different types of services may need to be involved and
- Sometimes specific changes in a program or activity will help improve the fit with the person's needs.

## HOW TO NAVIGATE THE SYTEM WHEN A PERSON HAS A DUAL DIAGNOSIS

### GETTING STARTED

*How do you know if a person might have an intellectual disability and/or mental health needs?*

The following are some questions that can help you identify common indicators. Often family, friends and staff at agencies do not know what the signs are of a mental health need or an intellectual disability. These indicators will help you decide if you need to consult a professional for a more thorough assessment. Keep in mind that these are only suggested indicators and do not constitute a diagnosis.

#### Cognitive indicators:

- Does he/she communicate in short sentences and seem egocentric in his/her thinking?
- Does he/she seem on the surface to be able to do things he/she really can't?
- Does he/she have trouble generalizing?
- Does he/she seem to learn slowly?
- Does he/she have trouble with abstract thinking? (For example, recognizing how two things are similar.)
- Does he/she do better on concrete and structured tasks? (For example, when you are very specific and break things down into steps?)
- Does he/she have memory problems?
- Does he/she have a splinter skill that fools people but has been learned by rote?
- Is he/she a poor problem-solver? Does he/she show poor judgment?
- Does he/she have trouble understanding 'why' questions?
- Is he/she good at picking up non-verbal social cues ?
- Do people disagree about whether this person is higher functioning or not?

#### Mental health needs indicators:

- Is he/she overly dependent for his/her capabilities?
- Is he/she overly independent for his/her capabilities?
- Is change really hard for him/her?
- Does he/she lack peers and friends?
- Is he/she impulsive?
- Is he/she withdrawn?
- Is he/she aggressive, verbally or physically?
- Does he/she have trouble with anger?
- Is he/she irritable?
- Has he/she been in trouble with the law?
- Does he/she have problems with inappropriate social or sexual behavior?
- Does he/she deny being intellectually disabled?
- Does he/she appear higher functioning than he/she is?
- Is there a diagnosed mental illness?
- Does he/she hurt himself/herself?

- Is he/she sleeping more or less?
- Has there been a change in his/her appetite?
- Does he/she seem overactive?
- Is he/she overly fearful?
- Is he/she extremely confused or disoriented?
- Does he/she hear voices that are not there? (This is not to be confused with talking to oneself for company or to reduce anxiety)
- Has there been difficulty in getting professionals to agree over the years about a diagnosis for both the range of cognitive functioning and their mental health?
- Are there family problems that interfere with his/her functioning?
- Is there a parent with an intellectual disability or a mental health problem?

***Do you need a diagnosis to get services?***

Unfortunately this is not an easy question to answer. Some organizations require a diagnosis and some do not.

No matter which agency you contact, the consumer will need to meet certain criteria that the agency has decided is required for a person to receive their services. For example a developmental service agency may require proof of an intellectual disability such as a psychological or psychiatric assessment of the person's level of functioning. However they might also accept more informal information that indicate that the person is functioning in this range. Many mental health agencies require a psychiatric diagnosis in order to access mental health services. Some may accept more informal description of behavior that might indicate that there is a mental health concern.

What if you have one diagnosis and not the other? With one diagnosis you can usually access services in the sector that is associated with the diagnosis. For example, if you have a diagnosis of an intellectual disability you should be able to access a range of services in the developmental service sector. If you have a diagnosis of mental illness you should be able to access a range of services in the mental health sector. The difficulty here is that you may get stuck receiving services in only one sector when in fact you need some support from the other sector as well. If you have a diagnosis of both an intellectual disability and a mental illness you can access a range of services specifically designed for persons with a dual diagnosis. Unfortunately, there is often a waiting list for many services in both sectors.

Sometimes agencies in the developmental service sector will be concerned about their ability to manage a mental health problem because they feel they don't have the knowledge and experience that is needed. Or on the other hand, a mental health agency may worry they don't know how to help a person with an intellectual disability. There may be situations where this is true. They will need some help from the "other" sector in order to help the consumer. In these situations you may need to get one agency to start to work with your relative/friend with some back up support from the other sector. If the consumer already has services with one sector, you could advocate finding a partner service in the other sector to help provide more of what the individual needs. The added

advantage of this is that you begin to develop a team approach that works very well with individuals with a dual diagnosis. You may still hear agencies use the term "primary diagnosis" and you may be asked if their intellectual disability or their mental illness is their "primary diagnosis". How you answer this question may determine whether you get service from this organization.

### ***Do I need an assessment?***

It is always very important to have a good overall assessment or an accurate picture of the person and all their needs. Otherwise you won't know how to put together the right services to really help the person and their mental health will likely get worse. A good assessment needs to include physical and mental health and an understanding of the nature of the person's intellectual disability. Important areas to consider for a comprehensive assessment include medical, psychiatry, psychology, communication, medication, vocational, behavioral, neurological, endocrinology, genetic, environmental, systems, family, social, cultural and sexuality. You can get an assessment at an agency that specializes in dual diagnosis or you may have to gather information and reports from different people such as a family doctor, community agency reports and/or a psychiatrist and put it all together. Even if the individual has had a thorough assessment in the past, they may require a new assessment as their situation changes.

### ***Tips on getting started:***

- A person with an intellectual disability and mental health needs may want to contact an organization on their own. More often they will need some assistance from their natural supports (family / friends) or a staff person at an agency. For example, they may need some coaching about what to say; have you sit with them while they call or they may need you to be the person to speak on their behalf.

### **When calling on behalf of a family member / friend**

- Prepare yourself and be clear about what your relative/friend needs before you call. Make a list about what activities they like, what things they do well at and what the problems are. Think clearly about what you want/need from the organization. For example, your family would like two hours of support each day or your family/friend needs a day program.
- Remember this is a chance for you to see if the organization feels like a good fit for your relative/friend and the organization is also trying to decide if your relative/friend would be a good fit in their program. Share important information and be sure to balance the information about both your relative/friend's strengths and areas of difficulty.
- Ask to speak to someone who is informed about what services are offered and that can answer your questions. Take the time to talk to staff so you can get a sense of how the organization works - its "culture". Or you may need to meet with a worker in the organization you are calling to discuss what your relative/friend needs.

- You may decide to get a case manager to help you with this whole process. A case manager can help you sort out what your relative/friend needs, what you as a family need and how to match that with the supports and services that are available. There are case managers in both the mental health and developmental sectors that can help. (For more information see *What can a case manager do for you and how to get one*; pages 18-20).
- If you don't get a good response when you call an organization, what do you do? Call another agency or you can advocate for your relative/friend.
- Remember to record the worker's name, phone number, date and response.

***Questions to consider when calling organizations.***

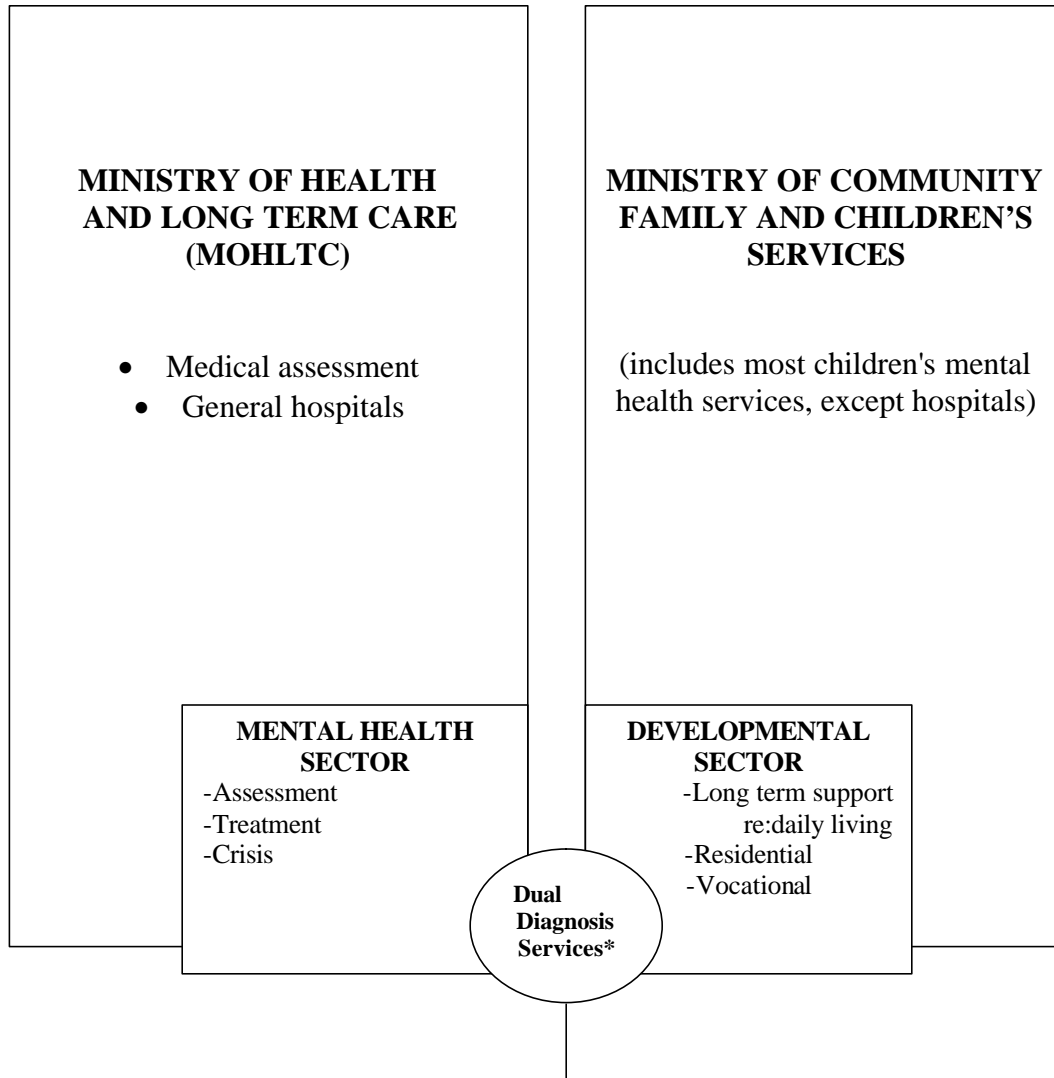
The following is a list of questions to review before you call an organization to ask about their services. You may already have some questions of your own. Have a look at this list and see if there are any other questions that you might like to ask.

- Are you the intake person and can you answer my questions about your organization?
- What is your name?
- What area do you serve?
- Can your program serve someone with a dual diagnosis?
- Can we come and visit?
- What choices do we have about which programs you offer? Can we choose ourselves or do you do an assessment and then assign?
- Can you do an assessment to help decide what is needed?
- Is your program flexible and can it be tailored to suit an individual?
- Is there a fee for any services?
- What age are most of the people in the program?
- What is the physical set up of the program?
- Do you offer job training or placement? How many people have you placed?
- What recreational or social programs do you have?
- What kind of activities do you do?
- Does this program operate 5 days a week?
- Do you have weekend or evening activities?
- Can you manage many different types of behavior?

- How do the medical and mental health needs of individuals get met?
- In what areas are your staff specially trained and what are their qualifications?
- What is the ratio of staff to clients?
- Do you have consultants to your program? For example do you have a psychologist or psychiatrist on call?
- Is your agency accredited?
- How are you funded?
- What is the role of parents in your organization?
- What can I do if I have a complaint?
- If I can't get into your services, can I get in if I pay a fee for the program?
- Who don't you serve and why?
- Have you implemented the Abuse Policy? (This policy applies to developmental sector agencies). See the separate description of this policy in *Government Programs and Policies*; Abuse Policy; page 39.)



## The Two Ministries Responsible for Funding and Policies Related to Dual Diagnosis



### Dual Diagnosis Services:

These specialized services can be:

- A specialized program for individuals with a dual diagnosis based in either the mental health or developmental service sector
- A group of agencies that are partnering to provide a range of services in both sectors

## NAVIGATING THE SECTORS

### *What you need to know about the system to get around*

There are two separate sectors that provide funding and policy direction for services for persons with a dual diagnosis. They are:

- the health sector (including mental health) funded by the **Ontario Ministry of Health and Long-Term Care** and
- the developmental sector funded by the **Ontario Ministry of Community, Family and Children's Services**

The fact that two ministries are involved can make it quite complicated to know how to get services and where to begin to look for them. Sometimes people get connected to one sector or the other, but usually not to both. When this happens they will not get the help they need because they are missing what is needed from the other sector. For example, if a person with an intellectual disability has a worker in the developmental sector they might not know the signs for depression and what to do to help. In another situation, a person, diagnosed with schizophrenia, might have a mental health worker from the health sector that is helping them cope with the symptoms of schizophrenia and making sure their medication is right but they might not know what to look for to know if the person also has an intellectual disability. It can be difficult and confusing for everyone involved finding the right kind of help and support. It really works best if there is a special combined approach with both the health and developmental sector and for everyone to work together as a team.

Each sector has areas of special knowledge that they can offer. For example, the developmental sector can help with future planning such as where to live and what supports the consumer needs in the community, while the health sector (mental health) can assist in areas such as mental illness and medication. Another important point is that many agencies do not include family members as part of the planning process. It works best if everyone is included.

In the last few years in Toronto many people have been trying to provide better services for people with a dual diagnosis. There are still a lot of changes needed but some things are better. In 1994 the Ministry of Health changed its definition of who should be the first ones to get mental health services and they included individuals with a dual diagnosis in the definition of serious mental health problems that should be a priority. This change has led to many opportunities for mental health agencies to work together with agencies in the developmental sector.

There is a recent initiative within the Ministry of Community, Family and Children's Services that will be helpful to consumers and families. Now when you contact a *developmental sector agency*, that agency is obliged to stay connected to you. Either they will provide the service or they will find an alternate service to fit your needs. This

initiative will help prevent the stress, frustration and disappointment of reaching out for help only to be told that that agency can't help you.

While these changes remove some barriers and there is a better range of services now, more joint work is still needed so that all the required services can be available.

There may be some confusion about which sector to turn to for long-term care services. Please note that (despite the name) the Ministry of Health and Long-Term Care is not the primary provider of long-term care for persons with an intellectual disability. **Most of the long-term care services are provided by the developmental sector** through the Ministry of Community, Family and Children's Services. However some individuals with an intellectual disability and serious mental health difficulties do receive long-term care services through the ministry of health but relatively few. The Ministry of Health and Long-Term Care provides long-term care services for consumers with serious psychiatric disabilities and those who need nursing home care such as the elderly.

Please remember that the system is always changing. This describes the system at the time this handbook was written. There will undoubtedly be more changes in the future, some positive and some negative in regards to services for persons with a dual diagnosis. There may be new policies that have a direct impact or a new program that might be available. Check with someone who is aware of the system such as a case manager, agency staff or a representative of the ministry to clarify the current policies and programs.

### ***What can a case manager do for you and how to get one?***

It can be very confusing to sort out what services the consumer needs and if those services are available. You may find that you would like a case manager to help you decide who to contact and also to help you begin to get everyone working together.

Case management is a service provided by staff working at agencies. They are usually referred to as case managers. Although case management services may differ somewhat from agency to agency and within the mental health sector and the developmental sector, they serve as a central point to integrate all the stakeholders including consumers, families and service providers. There are some *common functions which all case managers fulfill*.

- **Assessment.** Usually case managers will help you assess the overall situation and pull together all the information from various sources. They may refer the consumer to someone else for a specific assessment, such as a psychiatrist or psychologist.
- **Assistance with Service Planning.** They help an individual and/or family decide what kind of services and supports they currently require as well as anticipate what the future needs might be. Using this information, the family and/or individual can prepare a plan which describes what supports and services to seek and when.

- **Information.** They can be an excellent source of information about the services that are available as well as providing educational materials related to your needs.
- **Referrals.** They can refer the consumer to available resources with the prior approval of the family and/or individual. This may include making a phone call, assisting with the completion of application forms, or writing referral letters that describes the person's current needs and situation.
- **Advocacy.** They can advocate on behalf of a person to assist him/her to obtain or create services and supports.
- **Coordination.** They can assist the family and/or individual to coordinate the various services and supports being used, acting as the central point to ensure that services are being used in a way that best meets the person's needs and to promote a team approach.
- **Counselling.** Some case managers provide individual and/or family counselling.
- **Support.** They provide support and encouragement, plus being a good listener!

Sometimes a family member or friend has the role of case manager. Case managers are available in both the developmental and mental health sectors. Unfortunately, there is sometimes a wait list for this service and some agencies require a diagnosis of either an intellectual disability or mental illness. For a range of **case management services** in both sectors check the listings in this handbook under the subject heading case management or look in the *Blue Book, a Directory of Community Services in Toronto* which lists services and supports used by the broader community. The *Blue Book* may be seen at any public library branch and community agencies and hospitals. Information in *the Blue Book* may also be obtained by phone by calling Community Information Toronto at 416-397-4636 or going to their web site [www.communityinfotoronto.org](http://www.communityinfotoronto.org).

- If you are looking for a *developmental sector case manager* you can call the **Adult Protective Service Worker (APSW) Program** if the consumer lives on their own in the community or is planning to within the next year or you can call one of the **Family Support Worker (FSW) Programs** if the consumer is living with their family. Both these programs are listed in the handbook.
- For a *mental health case manager* call one of the **mental health sector case management agencies** listed in this handbook or Blue Book.
- *Or if you don't know who to contact* to get the right help, you can call these numbers and they will give you information over the phone:
- **Dual Diagnosis Resource Service (DDRS) 416-535-8501 Ext 7800** and/or
- **Griffin Community Support Network (GCSN) 416-222-3563** (See Griffin Centre)

Once you (or the case manager) have pulled together all the assessment material or a specialized assessment has been completed, the next step is to match the needs of the consumer with the supports and services that are available in the community (See the chart *Supports and Services Guide*, page 25 and *Index to Supports and Services*, pages 44-54). Some people with a dual diagnosis require a lot of support in specialized programs where they live, work or go to daily activities, while others can live and work more independently in the community with much less support.

### ***What to do in a crisis?***

Contact your relative's family doctor or psychiatrist for an assessment when your relative / friend is becoming very ill, and you are afraid that he or she may be a danger to himself/herself or others if treatment is not in place.

When the situation gets critical first call any available professional who knows the individual well. He or she may be able to assist in problem solving and in directing you to the most appropriate service under the circumstances. If you cannot reach someone, DO NOT WAIT.

- Contact the *crisis service specifically geared to persons with an intellectual disability or dual diagnosis* by calling

**Griffin Community Support Network - 416-222-3563**

or after hours (9:00 PM) call the

**Gerstein Center - 416-929-5200.**

They offer a range of crisis services including a mobile crisis team that can come to your home if necessary, bring the person to hospital or provide a safe place to stay overnight when hospitalization is not possible or unacceptable. This network can provide short term residential support and placement options for persons 16 years and over who have an intellectual disability or a dual diagnosis.

- When a *child age 12 - 18 years is in crisis* you can call **Youthdale Crisis Service** at **416-363-9990.**
- Or for any crisis situation **you can go to your local hospital emergency department.**
- If you are upset and need someone to talk to, you can call the Distress center 24 hrs / day. A volunteer will provide you with support over the telephone. Call the **Distress Center** at **416-408-4357.** See listings for additional Distress Center phone numbers.

### ***How to get a one-to-one contract worker?***

One to One contract workers can provide an important type of individualized support to consumers, families and service providers in the home and community by offering: intermittent respite; opportunities for recreation or socialization; teaching life skills; providing additional supports to maintain the consumer in their current environment or at times of transition or to assist consumers in acquiring new skills. The funding program, Special Services at Home, supplies financial assistance to a family or individual to pay the expenses of hiring a "contract worker". (For more information about this program see page 38 ). Such contract workers are usually hired directly by the family and/or individual to carry out specific goals to improve the person's quality of life.

#### Tips on hiring a contract worker:

You can begin to look for a contract worker on your own. The following suggestions may help you in this process. Or you may decide you would like some assistance. There is a program called CHAP that is specifically geared to facilitating connecting individuals with disabilities and support workers through a Family Registry and Worker Database. Call CHAP at 416-422-7045 or visit the respite web site for more information on this program [www.respiteservices.com](http://www.respiteservices.com)

#### Places to look or post for a worker

- Developmental sector respite cluster web site: [www.respiteservices.com](http://www.respiteservices.com) (This web site is specifically geared to assist families in the process of getting a contract worker and maintains a list of potential workers.)
- Agencies that serve people with disabilities.
- Local religious organizations such as churches and synagogues.
- Community Centres.
- Colleges, universities, and high schools.
- Employment boards.
- Libraries.

#### Getting started:

1. Make a list of the duties the contract worker would fulfill.
2. Describe what essential qualifications/attributes you are looking for in a worker to carry out these duties. Some examples are previous experiences; first aid training; having a car; hours of availability; and attitude to persons with disabilities.
3. Screen over the phone by asking each caller questions related to these qualifications/attributes.

4. Conduct in-home interviews with candidates who have "passed" the phone screening. Have a prepared list of questions, including "what if," situations. Make sure that the candidate meets the person with special needs to observe how they interact.
5. When you have chosen a candidate, review carefully all issues related to financial arrangements, insurance coverage, and job obligations.
6. Provide adequate training and support to the worker, including specialized training regarding the needs of the individual.

## **THINKING ABOUT WHAT IS NEEDED**

### ***The Supports and Services Implementation Guide***

The Supports and Services Implementation Guide is a tool to help you plan. The guide identifies an ideal range of supports and services that combine elements of both the mental health and developmental service sectors. Use this guide to help you think about what is needed or what is missing in the services you already have and then to match the consumer's needs appropriately with resources. It outlines six stages in the implementation of the assessment, intervention and treatment planning process. It should be noted that a consumer might enter this range of supports and services at any point depending on their needs and situation. The overall goal is to develop a comprehensive support network for each individual. This approach requires that all involved (family, friends, agency staff at various agencies, family doctor etc.) work together and communicate effectively. You may decide to take a central role in arranging services or you may want to find a case manager to help you with this process and with the ongoing communication between all involved.

**FOR SUPPORTS AND SERVICES GUIDE  
SEE NEXT PAGE →**





# SUPPORTS & SERVICES IMPLEMENTATION GUIDE FOR PERSONS WITH A DUAL DIAGNOSIS

Stage 1

Areas To Consider For A Comprehensive Assessment (e.g.)

• medical	• psychology	• medication	• behavioral	• endocrinology	• environmental	• family	• cultural
• psychiatry	• communication	• vocational	• neurological	• genetic	• systems	• social	• sexuality

Stage 2

Integrated Multidisciplinary Assessment

Stage 3

Clarification of Needs / Planning / Intervention

Stage 4

MATCHING RESOURCES AND NEEDS

Informal Support Networks	Case management	Social / recreation	Day Activity	Residential	Treatment	Respite	Crisis	Hospital
Family, friends, co-workers, neighbours	Family, friend, service provider (assuming informal case management role)	Family, friends, and neighbours	Household activities	Family, home or independent apartment	Life and social skills programs	Informal arrangements: relatives, friends, neighbours, etc.	Informal support network: family, friends, neighbours, etc.	Outpatient services
↑	↑	↑	↑	↑	↑	↑	↑	↑
↓	↓	↓	↓	↓	↓	↓	↓	↓
Low need / Less Intensive Intervention	Formal case manager designated	General parks & recreation programs	Independent job	Boarding homes & semi-independent apartment programs	Generic counselling • individual • group • family	One to one contract worker to home environment	Crisis telephone line	Traditional services
↑	↑	↑	↑	↑	↑	↑	↑	↑
↓	↓	↓	↓	↓	↓	↓	↓	↓
High need / More Intensive Intervention	Intermittent case management	Special needs programs ("low support")	Semi-independent job in community	"Low support group home	Treatment services: (e.g.) • Home Care • behavioral • speech therapy • art therapy	Residential setting (low support) Residential setting (high support)	Mobile crisis service Crisis respite for stabilization	Short term inpatient hospitalization
↑	↑	↑	↑	↑	↑	↑	↑	↑
↓	↓	↓	↓	↓	↓	↓	↓	↓
	Intensive &/or long term case management	Special needs programs ("high support")	"High support day treatment program	"High support residential treatment program/group home	"Specialized services: (e.g.) • therapy • pharmacology • multidisciplinary team	Hospital - Inpatient (General Hospital) Hospital-Inpatient (Provincial Psychiatric Hospital)	Hospital emergency room Inpatient hospitalization for stabilization	*Specialized inpatient unit (Provincial Psychiatric Hospital) Long term institutionalizer

Stage 5

CO-ORDINATION & COLLABORATION OF SUPPORTS & SERVICES ACROSS THE SECTORS\*

Cross sector - Multidisciplinary Teams, Education & Training

Stage 6

Reassessment & modification of plan (if necessary)

Ongoing evaluation & monitoring

Key:

- \*Low support = low to moderate structure & staff ratio
- \*High support = high structure & staff ratio
- \*Specialized = dual diagnosis
- \*Sectors = (e.g.) mental health, developmental services, correction



## **KEY ACCESS POINTS AND COMMITTEES**

### **Two Key Specialized Services**

#### **Dual Diagnosis Resource Service**

Dual Diagnosis Resource Service (DDRS) offers a community based consultation and treatment team and resource, respite and safebed networking services. The Community team is operated by The Dual Diagnosis Program at the Centre for Addiction and Mental Health (CAMH). You can call **416-535-8501 Ext 7800** if you need help and are not sure what to do.

#### **Griffin Community Support Network**

The resource, respite and safebed network services are provided by the Griffin Community Support Network (GCSN). This network offers short term residential support & placement options for persons with an intellectual disability and persons with a dual diagnosis 16 years and over. Fifty partnering agencies are involved in the network. You can call **Griffin Community Support Network - 416-222-3563** or **after hours (9:00 PM) call the Gerstein Center 416-929-5200**.

### ***Key Committees and Government Contacts***

#### **Toronto Developmental Services Planning and Co-ordination Council**

The Council (TDSPC) consists of family members, board members of developmental agencies and government staff. It is mandated to plan for and co-ordinate the Toronto Developmental services sector to support implementation for the developmental services model for Toronto. It also acts as a forum for system accountability. It will provide recommendations to the Toronto Region of the Ontario Ministry of Community, Family and Children's Services on the planning, co-ordination and management of developmental services in Toronto.

### **Cluster groups**

There are four cluster groups in Toronto comprised of developmental agency staff. They are:

1. **Crisis**
2. **Residential / Day Programs**
3. **Respite (See web site: [www.respiteservices.com](http://www.respiteservices.com))**
4. **Community Supports.**

The cluster groups, working with the Toronto Developmental Services Planning and Co-ordination Council (TDSPC), will make specific recommendations related to their individual mandates.

### **Dual Diagnosis Implementation Committee**

This Committee, funded by both the Ministries of Health & Long-Term Care and Community, Family & Children's Services, consists of family members, ministry staff, and agency staff including hospital representatives. The Committee oversees and provides leadership to the co-ordination of the dual diagnosis system design implementation process. It is focused on system and service delivery integration.

### **Ontario Ministry of Community & Family and Children's Services**

Call 416-325-0500. Web site: [www.gov.on.ca](http://www.gov.on.ca)

### **Ontario Ministry of Health and Long-Term Care. Mental Health Program.**

Call 416-314-5518. Web site: [www.gov.on.ca](http://www.gov.on.ca)

## FOR FAMILIES AND FRIENDS

### *What supports do you need?*

Persons with a dual diagnosis often need a lot of support from their natural supports including family and friends. While each person's needs may vary, providing care can be very challenging on a daily basis. Your caregiving may include providing basic needs such as housing, meals, transportation, assistance in life skills and scheduling activities and being an emotional support. If there is no case manager you may also be the lead person trying to help navigate the system, find the appropriate services and deal with crisis situations. Your role as caregiver is critical. Juggling all of these tasks and responsibilities, in addition to looking after yourself and other demands such as family or work, can be very stressful.

Repeated crises and the lack of an appropriate range of services can seriously affect families and friends. This often leads to stress, fatigue and burnout. Families often feel blamed and burdened by the systems and this leads to feelings of disillusionment and anger. Misdiagnoses, which occur frequently, lead to confusion for family members. The cloak of competence, combined with values around normalization, can lead to high expectations for the individual with a dual diagnosis. Many service providers, particularly in the adult system, do not include family members as part of the planning process. It is important to remember that gains for the individual will not be maintained if you are not involved in the planning process and you are not provided with the supports that you need.

It is very important for you to look after yourself too. As caregiver, for your family member or friend, you may want to take some time to think about what support you need in order to keep your energy and spirits up. Your role can be particularly challenging as you are often caught between meeting the needs of your family member or friend and your role in advocating in a system that is very difficult to understand with limited resources. There is support available that you might find brings some comfort and relief to your feelings of isolation and frustration. There are a number of mutual-aid / self-help support groups for caregivers and there are also community agencies that can provide necessary resources to you. A mutual-aid / self help support group gives you a chance to get some much needed support for yourself, share strategies and tips about which organizations are most helpful and what works and doesn't work when trying to get services. You might also be able to get some help in advocating for services if you haven't been successful on your own. You might like to try a support group such as Concerned Parents that is specifically geared to helping family / friends who are caregivers to an individual with a dual diagnosis. You can reach **Concerned Parents** by calling **416-492-1468** (see pages 53-54 of the index for a list of other support groups or look up mutual-aid / self-help support groups in the Blue Book). Community agencies can also be a source of support to families. Agencies in both the mental health and developmental sectors can provide information and/or referrals to a range of appropriate resources, and some offer counselling to families.

## ***Respite***

Respite services can provide care and family relief. There are both in-home and out-of-home respite services. In-home services include hiring contract workers to come to your home and provide intermittent relief, to teach life skills and/or during times of transition. Special Services at Home, an Ontario Government program, can supply funds for qualifying families to pay a contract worker. (For more information on this program see page 38). If your family member / friend has a mental illness and requires support in the home, you may be able to access services through your local **Community Care Access Centre**. They are responsible for home care services and depending on your situation may be able to offer some in-home respite services following a hospitalization or to assist with taking medication appropriately. There are times when caregivers need a break. You may need to attend to other demands related to work; family or you want to take a vacation. In these situations you can arrange for your family member to stay in a residential setting and be cared for in your absence. There is a web site you can go to learn more about respite services in the Toronto area – [www.respiteservices.com](http://www.respiteservices.com). This web site will also list the names of people you might want to consider hiring as a contract worker.

## SERVICES FOR ETHNOCULTURAL / ETHNORACIAL COMMUNITIES

The following is a list of agencies that provide counselling and information for various ethnocultural or language groups. Counselling is available in English and the languages listed. **These agencies do not specifically provide services for persons with an intellectual disability and/or dual diagnosis** but may be able to support you within your own cultural community and also help you link with an agency or services in the developmental and/or mental health sector.

### **Across Boundaries-An Ethnoracial Mental Health Centre. 416-787-3007.**

An ethnoracial mental health centre for people of colour with serious mental health problems; anti-racism and mental health education.

### *Counselling for Specific Ethnocultural Groups*

#### Aboriginal / First Nations

Anishnawbe Health Toronto **416-360-0486**  
Individual, couple and family counselling.  
Languages: Objibway, Cree, Mohawk, Odawa

Toronto Council Fire Native Cultural Centre **416-360-4350**  
Languages: Cree, Micmac, Objibway, Oneida

#### Afghan

Afghan Association of Ontario **416-744-9289**  
Counselling services  
Languages: Dari, Farsi Pashto

#### African

Whyy Mee Family Counselling Foundation of Metro Toronto **416-481-5462**  
Adult, youth, group, divorce and family counselling  
Languages: West Indian dialects; Interpreters for Farsi, French, Spanish

#### Arabic

Arab Community Centre of Toronto **416-231-7746**  
Counselling for students, individuals, families, victims of violence  
Languages: Arabic

#### Armenian

Armenian Community Centre **416-491-2900**  
Health Counselling  
Languages: Armenian



Assyrian Speaking

Welfare Committee for the Assyrian Community in Canada **416-741-8836**  
Counselling services  
Languages: Assyrian

Black

Jamaican Canadian Association **416-746-5772**  
Program for Abused & Assaulted Black Women - counselling  
support group  
Languages: Spanish, West Indian dialects

Caribbean Youth and Family Services **416-740-1558**  
Individual, family & group counselling; women's support groups  
Languages: West Indian dialects

Tropicana Community Services **416-439-9009**  
Ethnospecific or culturally appropriate counselling in  
Scarborough area

Cambodian

Canadian Cambodian Association of Ontario **416-736-0138**  
Orientation counselling  
Languages: French, Khmer

Cambodian (Continued)

South East Asian Services Centre **416-362-1375**  
Individual and family counselling for victims of violence  
Languages: Cantonese, Mandarin & Vietnamese

Chinese

Chinese Family Life Services of Metro Toronto **416-979-8299**  
Individual, marital & family counselling; crisis intervention  
Languages: Cantonese, Mandarin

Toronto Chinese Community Services Association **416-977-4026**  
Counselling; women's support group  
Languages: (Chinese) Cantonese, Hakka Mandarin, Taishan

Czech and Slovak

Czech and Slovak Association of Canada **416-925-2241**  
Crisis Intervention; counselling  
Languages: Czech, Slovak

Eritrean

Eritrean Canadian Community Centre **416-658-8580**  
Counselling services

Languages: Arabic, Tigre, Tigrinya

Filipino

Kababayan Community Centre  
Counselling and support groups  
Languages: Filipino

**416-523-3888**

French-speaking

Centre Medico-Social communautaire  
Individual, family & couples counselling

**416-922-2672**

Greek

Greek Orthodox Family Services and Counselling  
Services and Wife Assault Program  
Languages: Greek

**416-291-5229**

Iranian

Iranian Community Association of Ontario  
Family counselling  
Languages: Farsi

**416-750-4624**

Italian

COSTI - Family Counselling Centre  
Individual, couple and family counselling; counselling for children;  
family violence counselling; groups for assaulted women and  
abusive men; mental health groups. Fee based on income.  
Languages: Italian

**416-244-7714**

Japanese

Japanese Social Services  
Counselling and social services  
Languages: Japanese

**416-385-9200**

Jewish

Jewish Family and Child Service of Metro Toronto  
Individual, couples, family and group counselling; groups for  
assaulted women; groups for abusive men  
Languages: French, Hebrew, Hungarian, Russian, Yiddish

**416-638-7800**

Korean

YMCA of Greater Toronto -Korean Services  
Support counselling services  
Languages: Korean

**416-538-9412**

Loatian

Lao Association of Toronto

**416-398-3057**

Support counselling services  
Languages: French, Lao, Thai

Muslim

Islamic Social Services and Resources Association **416-767-9358**  
Individual, family and youth counselling; support groups  
Languages: Arabic

Polish

Polycultural Immigrant and Community Services **416-233-0055**  
Counselling youth, family and women.  
Languages: Polish, Russian

Somali

Somali Canadian Counselling Association in Ontario **416-248-4131**  
Supportive counselling  
Languages: Arabic, Somali

South Asian

Riverdale Immigrant Women's Centre **416-465-6021**  
Family, group and crisis counselling for women  
Languages: Bengali, Chinese, English, Gujurati, Hindi,  
Katchi, Punjabi, Tamil, Urdu

South Asian Family Support Services **416-431-4847**  
Individual, youth and family counselling; support groups  
Languages: Bengali, Dari, Farsi, Gujurati, Hindi, Pashto,  
Punjabi, Tamil, Urdu

South Asian Women's Centre **416-537-2276**  
Counselling  
Languages: Gujurati, Hindi, Punjabi, Sinhalese, Tamil, Urdu

Spanish-speaking

Centre for Spanish Speaking Peoples **416-533-8545**  
Support groups for women; crisis counselling for victims of  
Domestic violence  
Languages: Spanish

Ukrainian

Ukrainian Canadian Social Service Toronto **416-763-4982**  
Supportive counselling; client intervention and assistance  
Languages: Ukrainian, limited help in other Slavic languages

Vietnamese

Vietnamese Association Toronto **416-536-3611**

Support counselling, including counselling for assaulted women  
Languages: Vietnamese

West Indian

West Indian Volunteer Community Support Services **416-743-3658**  
Individual and family counselling; support groups; culturally sensitive, volunteer-based support to children, youth and their families; family crisis intervention

Multicultural Counselling Services

Access Alliance Multicultural Community Health Centre **416-324-8677**  
Counselling (psychiatrist and social worker) for Korean, Portuguese, Spanish-speaking and Vietnamese communities. Interpreters for 60 languages. Call ahead.

Family Service Association - Counselling Services **416-595-9618**  
Individual, group, couple and family counselling, culturally sensitive services focused on a range of issues including anxiety, depression, separation and divorce, family violence, adult survivors of childhood sexual abuse and parenting.  
Languages: depends on location, call to inquire

Catholic Cross-cultural Services (Scarborough) **416-757-7010**  
Support counselling  
Languages: Chinese, Farsi, Italian, Pilipino, Portuguese, Spanish and others

Women's Health in Women's Hands **416-593-1815**  
Short term counselling and support groups for immigrant women. Translation services provided

Other services

Access Alliance Multicultural Community Health Centre **416-324-8677**  
Cultural Interpretation Program Telephone / in person  
Interpretation for health issues

Canadian Centre for Victims of Torture **416-363-1066**  
Crisis intervention, art therapy, support groups; counselling For children and youth  
Languages: provide services in 35 languages. Make every effort to accommodate people in their own language.

Ethnoracial People with Disabilities Coalition of Ontario **416-657-2211**

**For more information about ethnoracial services call:**  
**Community Information Toronto** **416-397-4636**

## **GOVERNMENT PROGRAMS AND POLICIES**

### ***Government Structure***

As of the date of publication of this Directory, two separate Ministries of the Province of Ontario deliver services for persons with dual diagnosis. These two Ministries are the Ministry of Community, Family and Children's Services, which administers services for persons with intellectual disabilities, and the Ministry of Health and Long-Term Care (MOHLTC), which administers general health services and mental health services for adults.

In an effort to work collaboratively, a joint policy was developed in 1997 by both of these ministries regarding services for persons with a dual diagnosis and each made a commitment for funding. This has led to developing some specialized services such as the Griffin Community Support Network and the Dual Diagnosis Resource Service.

For Toronto, these two Ministries may be contacted as follows:

#### **Ontario Ministry of Community, Family and Children's Services**

477 Mount Pleasant Road, 3rd Floor, Toronto, M7A 1G1. Call 416-325-0500

#### **Ontario Ministry of Health and Long-Term Care**

5700 Yonge St., 5th Floor, Toronto, M2M 4K5. Call 416-314-5518

An up to date Government of Ontario Telephone Directory can be purchased from Publications Ontario at 416-326-5300. This lists all the government offices, locations, and phone numbers. For information about each ministry, specific laws and programs you can also go to the Government of Ontario Web site: [www.gov.on.ca](http://www.gov.on.ca)

*\*Please note that these addresses and phone numbers are correct as of the date of publication of this directory.*

### ***Politicians***

Since the responsibility for such services is provincial, all concerns or requests for political assistance should be directed towards your local Member of Provincial Parliament (MPP). To find out who your MPP is you may consult the Blue Pages in your phone book under the listing of Ontario Government. This information is also listed in the Blue Book, a Directory of Community Services in Toronto which lists services and supports used by the broader community. The Blue book may be seen at any public library branch and community agencies and hospitals. Information in the Blue Book may also be obtained by phone by calling Community Information Toronto at 416-397-4636 or going to the web site [www.communityinfotoronto.org](http://www.communityinfotoronto.org).

***Legislation regarding mental health, alternate decision making, consent to treatment and community treatment orders.***

As of the date of publication of this Directory, several important pieces of legislation were in effect regarding mental health, decision making and adults with disabilities. It is recommended that readers determine the status of any legislation before using the information detailed below. To purchase copies of any legislation, contact Publications Ontario at 416-326-5300 or visit the Ontario Government web site [www.gov.on.ca](http://www.gov.on.ca)

For a good overview of the mental health process in Ontario including a description of the relevant laws and required forms regarding admission for psychiatric care in a hospital, visit the Simcoe County Mental Health web site at [www.mhcva.on.ca](http://www.mhcva.on.ca) (go to *Mental Health Process in Ontario*). Further information about legislation can be obtained from **ARCH: A Legal Resource Centre for Persons with Disabilities**. Call **416-482-8255**.

Four relevant laws in Ontario:

**The Mental Health Act**

This act governs the rules and regulations related to providing and receiving mental health care services in Ontario. It describes what is required in order to admit someone to a psychiatric hospital or a psychiatric ward of a general hospital. For example, before anyone can be admitted for a 72 hour period to a psychiatric facility, a physician or Justice of Peace is required to assess each individual to determine if they meet the criteria for admission which includes behaviour that is seen as violent towards others, or threatening, attempting, or causing harm to themselves, or if the person is unable to take proper care of themselves. This act also covers confidentiality of psychiatric records and the roles of the Boards of Review, providers of mental health services and others such as police, justices of the peace.

**The Substitute Decisions Act**

This Act describes the processes by which individuals may make decisions over property or personal care on behalf of another adult who is deemed incapable of making such decisions. This can include Powers of Attorney and court appointed guardians.

**Health Care Consent Act**

This Act describes the process by which an adult is deemed to be capable of consenting to his or her own treatments of a therapeutic, preventive, palliative, diagnostic, cosmetic or other health related nature. It also explains how a person may be deemed incapable of consent and the process for ensuring that appropriate alternate decision makers are appointed who will attempt to determine as best as they can what the wishes of the vulnerable person might be and act accordingly.

## **Brian's Law**

This is a new law that came into effect in June 2000 and amended the Mental Health Act and the Health Care Consent Act with respect to Community Treatment Orders. A Community Treatment Order is signed by a physician and allows a consumer to receive treatment, care or supervision in the community instead of being in the hospital. This law was created to provide alternatives to hospitalization for some consumers who are seriously mentally ill. It outlines criteria for assessment and commitment which could allow families and professionals to act at an earlier stage of a person's mental illness. Not everyone can be considered for a Community Treatment Order. They must meet certain criteria which includes: having been an inpatient in a psychiatric facility, having a community treatment plan in place; or the assessing physician believing that a community treatment order would be a suitable approach to ensure continuation of proper treatment, supervision and care. Keep in mind that this is a new law. It is unclear, at the time of writing, how this law will be used and whether it can be helpful in the treatment and supervision of some individuals who have an intellectual disability and a serious mental illness. For more detailed information on Brian's Law visit [www.gov.on.ca](http://www.gov.on.ca) (go to *Mental Health Act Amendments: Questions & Answers.*)

## ***Financial Programs***

### **Special Services At Home**

*Special Services at home (SSAH)* is available through the Ontario Ministry of Community, Family and Children's Services. This program provides support to families caring for children and adults with an intellectual disability in their own homes. It is geared to fund in home support such as parent relief or teaching skills. Families hire their own contract worker.

You have to apply for this program and ministry staff decides if your family is eligible. If you are approved for this program it does not cost you any money and is not based on family income. Families are expected to use community resources (where available) before they consider using this program. Call the **Ontario Ministry of Community, Family and Children's Services** at **416-325-0624** to inquire about this program.

### **Ontario Disability Support Plan**

*Ontario Disability Support Plan (ODSP)* is available through the Ministry of Community, Family and Children's Services, an Ontario Government Service. This program can provide long-term financial assistance for people with disabilities, age 18 and over, who can't work permanently or for at least a year or more. There is a financial needs test and a disability application form when you apply.

Call **416-325-5666** to inquire about this program and get the address and phone number of your local ODSP office. Local ODSP offices are also listed in the Blue pages of the telephone book. You will need to make an appointment and ask what type of information

you need to take, such as bank statements, identification, official papers. It may take a while for ODSP to come through so apply as soon as possible. You might want to apply for this program six months before the 18<sup>th</sup> birthday.

### **Ontario Works**

This is a short-term program to assist individuals in returning to the work force. To apply for **Ontario Works** in Toronto call the intake screening number **1-888-465-4478**.

### **Information About and Assistance Getting Ontario Works or ODSP**

The following services are available if you need information or have problems or questions with government assistance:

- Client Services & Information Unit - Ontario Works **416-392-2956**
- Client Services & Information Unit - ODSP **416-325-5666**

Staff at these units act as go-betweens between clients, the general public and decision-makers. They can provide you with information if...

- you don't know what services are offered
- you don't know what the policy and regulations are
- you don't understand how the regulations affect you

### ***Abuse Policy***

In Toronto, a group of *developmental sector community agencies* and the *Concerned Parents of Toronto* have adopted a common policy which outlines what they will do in the event of an allegation of abuse. Every agency should have in their abuse policy, guidelines of family and client rights. Persons with an intellectual disability and their caregivers have rights under this policy.

The person or family has a voice in this process. If requested by the individual or the family, an External Consultation Team (under development) consisting of two individuals without ties to the agency involved will advise on the process, mediate conflicts, review agency procedures and make written recommendations to the family and agencies. The agency must investigate all allegations using trained senior staff not connected to the allegation. The implementation of this policy, distribution among agencies and the creation of an external consultation are all under development at the time of writing this handbook. The plan is that if you are not satisfied with the results of an internal investigation you will be able to contact the external consultation team. Otherwise, refer the matter to the Ministry of Community, Family and Children's Services by contacting the Office of the Toronto Regional Director at 416-325-0537.

You should ask any agency that you are involved with whether they have implemented this policy.



## **OTHER INFORMATION**

### ***Wills and Trusts***

Financial planning is important for all parents. It is even more crucial when parents have a son or daughter with a disability.

There are many factors to be aware of when preparing a will when you are trying to arrange for the most financially secure situation for your child with special needs.

Not all lawyers have experience with preparing wills that include a beneficiary with a disability.

To obtain specific information regarding wills and trusts, you may contact the following organization:

**Ontario Association for Community Living**  
**240 Duncan Mill Road Suite 403 North York, M3B 1Z4**  
**416-447-4348**

### ***Newsletter***

**NADD NEWSLETTER (National Association for Dual Diagnosis)** - to receive this newsletter send \$10.00 and your name and address to Habilitative Network c/o Plaza 69 Postal Outlet, 1935 Paris St. Box 21020, Sudbury, Ontario, P3E 6G6

## **THE TWELVE COMMANDMENTS FOR SUCCESSFUL LOBBYING**

### **BE NICE**

Respectable, reasonable, courteous, calm, but "concerned"

### **BE RESPECTFUL**

Everyone likes to feel important & to be helpful. .Enlist their sympathy & support.

### **BE CLEAR**

Ask for exact dates, times & who will be involved etc. Ask for things in writing. Ask for copies of correspondence. Write confirming minutes of meetings. Summarize & clarify.

### **BE INFORMED**

Do your homework, check your facts, consult experts, brief your members.

### **SEEK HELP**

Seek out mentors, consult experts, make alliances with agencies & other groups, hire a lobbyist if the task is very large.

### **KNOW YOUR SYSTEM**

Know how & where decisions get made. Target key points of intervention.

### **KNOW WHAT YOU WANT**

Governments do not solve problems - they adopt solutions. You must give them the problem & the solution.

### **SHOW STRENGTH**

Act as a group, stick together, act organized, act confident

### **BE PATIENT**

Constantly re-evaluate strategy & goals. Recognize small accomplishments. Moving governments takes time.

### **HAVE FUN, SUPPORT EACH OTHER**

Meet the needs of your members for personal support & friendship. Keep a sense of humour & keep each other in perspective.

### **BE TOUGH**

Keep pushing from all directions. Be political. Use the media. Be creative.

### **BE STRATEGIC**

Carefully plan your strategy in scale with your resources. Seize opportunities. Be proactive

## ***IMPORTANT NUMBERS AT A GLANCE***

(These supports and services are described in further detail in this section)

- |                                      |              |  |
|--------------------------------------|--------------|--|
| <b>COMMUNITY INFORMATION TORONTO</b> | 416-397-4636 | Blue Book. Directory of Community Services in Toronto. (7 days/week) |
|--------------------------------------|--------------|--|
  
- |                                     |              |                            |
|-------------------------------------|--------------|----------------------------|
| <b>CONCERNED PARENTS OF TORONTO</b> | 416-492-1468 | Support group for families |
|-------------------------------------|--------------|----------------------------|
  
- |   |  |                     |
|---|--|---------------------|
| <b><u>CRISIS:</u> GRIFFIN COMMUNITY SUPPORT NETWORK</b> | 416-222-3563<br>(after hours call Gerstein Centre<br>416-929-5200) | Age 16 years and up |
|---|--|---------------------|
  
- |                      |              |                 |
|----------------------|--------------|-----------------|
| <b>MOBILE CRISIS</b> | 416-929-5200 | Gerstein Centre |
|----------------------|--------------|-----------------|
  
- |                         |              |                           |
|-------------------------|--------------|---------------------------|
| <b>YOUTHDALE CRISIS</b> | 416-363-9990 | Youth age 12-18 in crisis |
|-------------------------|--------------|---------------------------|
  
- |                        |              |                      |
|------------------------|--------------|----------------------|
| <b>DISTRESS CENTER</b> | 416-408-4357 | 24 hr. phone support |
|------------------------|--------------|----------------------|
  
- |  |   |  |
|--|---|--|
| <b>DUAL DIAGNOSIS RESOURCE SERVICE (DDRS) – Centre for Addiction and Mental Health</b> | 416-535-8501 Extension 7800<br>(after hours call Gerstein Centre<br>416-929-5200) |  |
|--|---|--|
  
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|---|---|--|
| <b>GRIFFIN COMMUNITY SUPPORT NETWORK (GCSN)</b> | 416-222-3563<br>(access at Dual Diagnosis Resource Service)<br>(after hours call Gerstein Centre<br>416-929-5200) |  |
|---|---|--|

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ERA COMMUNITY LIVING SERVICES.....  
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PSYCHIATRIC PATIENT ADVOCATE OFFICE.....  
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